FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information 1 Name and Mailing Address of Respondent	esnondent														
Central Cellular L.L.C. 223 Broadway Davenport, OK 74026													Check his a char address.	Check here if this is a change of address.	
2. Year Report Filed 2018		3. Reporting Period Co Jan 1:	Reporting Period (Ending Deriod Covered by Report) Jan 15, 2018	Reporting Period (Ending Date of Pay Period Covered by Report) Jan 15, 2018	x		4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, are b. 16 or more (complete all sections)	Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	nployees duri one): omplete Sectionete all sectionete	ng Selected ions I, IV, and	V only)				
SECTION II - Full-Time Employees.	is.														
							Number of Employees (Report employees in only one category)	Number of Employees employees in only one c	yees one category)						
Joh								Race/Ethnicity							
Categories	Hisp	Hispanic or						Not-Hispanic or Latino	c or Latino						Total
	-	Latino			Male	ile					Female	ale			Columns A - N
-	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
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Executive/Senior Level Officials and Managers 1.1				77											0
First/Mid-Level Officials and 1.2 Managers				-											0
Professionals 2								5							0
Technicians 3				ž.											0
Sales Workers 4		-													0
Administrative Support 5 Workers															0
Craft Workers 6															0
Operatives 7															0
Laborers and Helpers 8								=							0
Service Workers 9															0
TOTAL 10	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
PREVIOUS YEAR TOTAL 11												20			0

				(a	Number of Employees (Report employees in only one category)	Number of Employees employees in only one c	yees one category						
					70	Race/Ethnicity							
Hispanic or						Not-Hispanic or Latino	ic or Latino						Total
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ating parties involved, date filed, courts or ating parties involved, date filed, courts or nowledge, information, and belief, all state Typed or Printed Name of Person Signing Stove Guest	47 CFR 22.32 garding violatity in in such matth to in such matth to its or agencies ts or agencies its or agencies in statements in statements in gring	0 0 11, 23.55, 90 ons of the ere during the ge violations is before which this report a	0 0 (1.4, 1.1.4) (and 101.3 ment provise year covere year covere sions of any r has been correct.	0 0 11. vegual emplo	0 0 mber or othe	erritorial, or local portunity statute ther designation	I statutes have been fill and current	0 0 and a status or displayments or displaymen	gainst this company.	7		
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